



## **St. Joseph's Hamilton Joint Boards of Governors**

*February 2015*

*Open Agenda Package – Web Version*

**St. Joseph's Hamilton Joint Boards of Governors – Open Agenda**  
**Thursday, February 26, 2015**  
**3:30 – 6:00 p.m.**

Dofasco Boardroom – St. Joseph's Healthcare Hamilton  
2<sup>nd</sup> Floor, Juravinski Innovation Tower  
50 Charlton Avenue East, Hamilton

- Elected Members** Mr. Carl Santoni (Chair), Mr. Peter Tice, Mr. Sonny Monzavi, Dr. Mary Guise, Mr. Jim LoPresti, Ms. Carolyn Milne, Mr. Ray Rocci, Ms. Moira Taylor, Mr. Tony Thoma, Mr. David Tonin, Mr. Adriaan Korstanje, Dr. Jack Gauldie, Ms. Lynn McNeil.
- Ex-Officio Members** Dr. Cyndie Horner, Ms. Winnie Doyle, Dr. Hugh Fuller, Dr. David Higgins, Dr. John Kelton, Dr. Kevin Smith
- Senior Management Team** Mr. David Bakker, Mrs. Jane Loncke
- Resource** Ms. Jessica Fry, Ms. Fadia Ros, Ms. Sera Filice-Armenio, Ms. Maureen Ellis.
- Guest(s)** Dr. S. Seigel, Ms. S. Johnston, Ms. L. Boich, Mr. J. Woods, Mr. S. Crawley.

VALUES: D = dignity, R1 = respect, S = service, J = justice, R2 = responsibility, E = enquiry

Time	Item	Topic	Motion	Values	Lead	Page
3:30pm	1.0	Call to Order				
	1.1	Opening Prayer and Reflection on ENQUIRY		R2	M. Taylor	
	1.1.1				All	
	1.2	Approval of Agenda	<u>All JBG Voting Members:</u> <b>THAT THE OPEN AGENDA OF THE FEBRUARY 26, 2015 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS COMMITTEE BE APPROVED</b>	R2	C. Santoni	
	1.3	Declaration of Conflict of Interest		R2	C. Santoni	
	1.4	Introduction of Guests		R1	C. Santoni	

3:40pm	2.0	<b>Consent Agenda</b>		R2	C. Santoni	1-6
	2.1	<i>Approval of St. Joseph's Hamilton Joint Boards of Governors Open Minutes</i>	<u>All JBG Voting Members:</u> <b>THAT THE OPEN MINUTES OF THE JANUARY 29, 2015 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE APPROVED</b>			
	2.2	<i>Governance Mission and Values Committee Minutes and Motions</i>	<u>All JBG Voting Members</u> <b>THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE OF FEBRUARY 3, 2015 BE ACCEPTED FOR INFORMATION</b>  <u>All JBG Voting Members</u> <b>THAT THE FOLLOWING POLICIES BE APPROVED:</b> <b>JBG #7 – COMMUNITY REPRESENTATION (NON BOARD MEMBERS)</b> <b>JBG #8 – GOVERNANCE APPROACH</b> <b>JBG #9 – POSITION DESCRIPTION FOR TRUSTEES</b> <b>JBG #22 – BOARD PEER REVIEW POLICY &amp; PROCESS</b>  <u>All JBG Voting Members</u> <b>THAT THE MINUTES OF THE NOMINATING SUBCOMMITTEE OF FEBRUARY 3, 2015 BE ACCEPTED FOR INFORMATION</b>  <u>All JBG Voting Members</u> <b>THAT THE JBG APPROVE THE APPOINTMENT OF MR. R. DOBSON TO THE JBG AND MR. V. SINGH AS A COMMUNITY MEMBER EFFECTIVE SEPTEMBER 2015</b>	R2	P. Tice	7-41

42-52

	2.3	<i>Resource &amp; Audit Committee Minutes and Motions</i>	<u>All JBG Voting Members</u> <b>THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF FEBRUARY 18, 2015 BE ACCEPTED FOR INFORMATION</b>	R2	S. Monzavi	53-100
<b>3:50pm</b>	<b>3.0</b>	<b>Quality &amp; Patient Safety</b>				
	3.1	<i>Quality Committee Minutes, Motions and Report</i>	<u>All JBG Voting Members</u> <b>THAT THE MINUTES OF THE QUALITY COMMITTEE OF FEBRUARY 10, 2015 BE ACCEPTED FOR INFORMATION</b>	S	R. Rocci	101-104
	3.2	<i>Medical Advisory Committee Presentation:</i>	<i>Dr. S. Seigel</i> <i>Chief, Department of Pediatrics</i>	E		
	<b>4.0</b>	<b>Highlight Report</b>				
	4.1	<i>No Highlight Report This Month</i>		R2		
<b>4:10pm</b>	<b>5.0</b>	<b>Reports</b>				
	5.1	<i>Report of Chair</i>		R2	C. Santoni	
	5.2	<i>Report of the President and CEO, St. Joseph's Health System</i>		R2	K. Smith	
	5.3	<i>Report of Presidents</i>		R2 / S	D. Higgins D. Bakker J. Loncke	105-107
	5.3.1	<i>SJHH/NHS Update</i>			D. Higgins/S. Johnston	
	5.4	<i>Report of President SJHH Foundation SJVD Foundation</i>		R2	S. Filice-Armenio M. Ellis	
	5.5	<i>Report of Chief Nursing Officer</i>		R2 / S	W. Doyle	
	5.6	<i>Report of President, Medical Staff Association</i>		R2	C. Horner	108-109
<b>4:30pm</b>	<b>6.0</b>	<b>Information / Education Items</b>				
	6.1	<i>JBG Closed Summary</i>		R2 / E	C. Santoni	110-114
	6.2	<i>JBG Walkabouts - Education Schedule</i>				
	6.3	<i>Article – Not for Profit Boot Camp</i>				115-117

4:35pm	7.0	<b>Adjournment</b>			
	7.1	<i>Motion to adjourn</i>	All JBG Voting Members: <b>THAT THE OPEN SESSION OF THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE ADJOURNED</b>		C. Santoni
4:35pm	8.0	<b>Break followed by Closed Session</b>			

Committee: **St. Joseph's Hamilton Joint Boards of Governors – OPEN SESSION** Date: January 29, 2015  
 Called to order at: 1530 hours Adjourned: 1640 hours

**St. Joseph's Healthcare Hamilton Voting Members:**

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Mr. A. Korstanje, Mr. J. LoPresti, Dr. J. Gaudie, Ms. L. McNeil.

**St. Joseph's Villa Dundas Voting Members:**

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Mr. R. Rocci, Mrs. M. Taylor, Mr. T. Thoma.

**St. Joseph's Homecare Hamilton Voting Members:**

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Dr. M. Guise, Mrs. M. Taylor, Mrs. C. Milne, Mr. D. Tonin.

Location: Dofasco Boardroom – 2<sup>nd</sup> Floor Juravinski Innovation Tower  
 Present: Mr. C. Santoni - Chair, Mr. T. Thoma, Mr. P. Tice, Mrs. M. Taylor, Mr. A. Korstanje, Dr. H. Fuller, Dr. M. Guise, Mr. R. Rocci, Mr. D. Tonin, Ms. L. McNeil, Mr. S. Monzavi, Mr. J. LoPresti, Dr. C. Horner.  
 Regrets: Ms. C. Milne, Dr. J. Gaudie, Ms. W. Doyle, Dr. J. Kelton.  
 Resource Staff: Dr. D. Higgins, Ms. F. Ros, Mr. D. Bakker, Mrs. J. Loncke, Ms. J. Fry, Dr. K. Smith, Mrs. S. Filice-Armenio.  
 Guests: Dr. D. Russell, Mr. V. Singh.  
 NEXT MEETING February 26, 2015

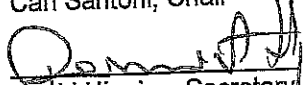
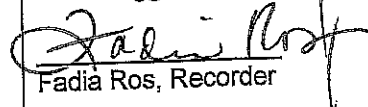
Subject	Discussion
<p><b>1. PROTOCOL</b></p>	
<p><b>1.0 CALL TO ORDER</b></p>	<p>The meeting was called to order at 1530 hours by C. Santoni.</p>
<p><b>1.1 OPENING PRAYER</b></p>	<p>D. Tonin opened the meeting with a prayer. There was reflection with respect to the value of RESPONSIBILITY.</p>
<p><b>1.2 APPROVAL OF AGENDA</b></p>	<p style="text-align: center;"><u>All JBG Voting Members</u></p>
	<p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p>
	<p><b>THAT THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS AGENDA BE APPROVED AS CIRCULATED</b></p>
<p><b>1.3 DECLARATION OF CONFLICT OF INTEREST</b></p>	<p>There was no declaration of conflict of interest.</p>
<p><b>1.4 INTRODUCTION OF GUESTS</b></p>	<p>Dr. D. Russell and Mr. V. Singh were introduced as the guests for the Open Session. Dr. C. Horner, President, Medical Staff Association was welcomed to her first meeting of the JBG.</p>
<p><b>2. CONSENT AGENDA</b></p>	
<p><b>2.1 APPROVAL OF ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS OPEN MINUTES</b></p>	<p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p><b>THAT THE OPEN MINUTES OF THE DECEMBER 18, 2014 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE APPROVED</b></p>

Subject	Discussion
<p><b>2.2 GOVERNANCE, MISSION AND VALUES COMMITTEE MINUTES AND MOTIONS</b></p>	<p style="text-align: center;"><u>All JBG Voting Members</u></p> <p>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</p> <p><b>THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE OF JANUARY 5, 2015 BE ACCEPTED FOR INFORMATION</b></p> <ul style="list-style-type: none"> <li>• D. Higgins noted that he has been contacted by The Hamilton Spectator with a request to increase the amount of information posted from the Open Session on the hospital website. Further discussion with respect to this will occur at the February Governance, Mission and Values Committee meeting and to ensure more detailed information is made available.</li> <li>• On page 17, item 2.2.3, Policy #6 the word should be "designated" not "designed".</li> </ul> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p>WITH THE ABOVE AMENDMENT, ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION, WAS PASSED:</p> <p><b>THAT THE FOLLOWING POLICIES BE APPROVED:</b>  <b>JBG#4 – CHAIR POSITION DESCRIPTION</b>  <b>JBG#5 COMMITTEE CHAIR POSITION DESCRIPTION</b>  <b>JBG#6 – OPEN/CLOSED/IN-CAMERA POLICY</b></p> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</p> <p><b>THAT THE BUSINESS OF THE HUMAN RESOURCES SUB-COMMITTEE BE CONDUCTED AS AN EXTENSION OF THE RESOURCE AND AUDIT COMMITTEE MEETING AT THE CALL OF THE CHAIR</b></p> <ul style="list-style-type: none"> <li>• P. Tice gave an overview of the proposed Information and Communications Technology Committee.</li> <li>• It was noted that the Committee was not comfortable with the limits and caps and there will be further discussion on materiality and monetary thresholds.</li> </ul> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</p> <p><b>THAT THE FORMATION OF A NEW INFORMATION AND COMMUNICATIONS TECHNOLOGY COMMITTEE (REPORTING TO THE RESOURCE AND AUDIT COMMITTEE OF THE JBG) BE APPROVED, EFFECTIVE IMMEDIATELY</b></p> <p><b>THAT THE INFORMATION AND COMMUNICATIONS TECHNOLOGY COMMITTEE TERMS OF REFERENCE BE APPROVED AS ENCLOSED (SUBJECT TO FURTHER REVIEW ON MONETARY THRESHOLD IN SECTIONS III-3 AND III-7)</b></p>

Subject	Discussion
<p><b>5. REPORTS</b></p> <p><b>5.1 REPORT OF CHAIR</b></p> <p><b>5.2 REPORT OF PRESIDENT AND CEO, ST. JOSEPH'S HEALTH SYSTEM</b></p> <p><b>5.3 REPORT OF PRESIDENTS</b></p>	<p style="text-align: center;"><u>All JBG Voting Members</u></p> <p>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</p> <p><b>THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF JANUARY 21, 2015 BE ACCEPTED FOR INFORMATION</b></p> <ul style="list-style-type: none"> <li>• C. Santoni attended numerous meetings and work continues on the annual presentation to the SJHS which will occur during the month of February.</li> <li>• Congratulations were extended to Dr. John Kelton, a member of the JBG, who was appointed as a member of the Order of Canada. Dr. Kelton is currently the Dean and VP of the Faculty of Health Sciences and the Dean of the DeGroote School of Medicine at McMaster. He is recognized for his research into blood cell disorders and for his contributions to making Hamilton a hub for health sciences research.</li> <li>• Members of the JBG attended the Medical Staff Association Annual Dinner Meeting on January 16<sup>th</sup>.</li> <li>• The Quarterly Research St. Joseph's Board of Directors, chaired by C. Santoni, was held this month.</li> <li>• The Around the Bay Road Race will be held on March 29<sup>th</sup>. C. Santoni noted that the JBG has a team participating this year and all sponsorships are welcome.</li> </ul> <ul style="list-style-type: none"> <li>• The Government and the OMA have failed to reach an agreement after a year of contract negotiations. Dialogue will continue between the Government and the OMA.</li> <li>• On Monday February 2<sup>nd</sup>, the Minister of Health will be announcing a call for 10 expressions of interest in the Integrated Comprehensive Care Model.</li> <li>• It was noted that ONA is in a legal strike position with respect to CCAC positions. It was noted that there is an increased risk in placement services for clients and increased pressure on hospitals. It is hoped that a settlement will be reached prior to strike action.</li> <li>• The MOHLTC initiative with respect to the Home Care Panel, chaired by Dr. Gail Donner, will be completed by January 30<sup>th</sup>.</li> <li>• It was noted that with the departure of Dr. Mark Crowther on April 1<sup>st</sup>, discussions with respect to research structure and innovation are underway.</li> <li>• An external review of St. Joseph's Home Care is almost complete.</li> </ul> <ul style="list-style-type: none"> <li>• D. Higgins noted that there have been challenges with respect to inpatient flow due to influenza, increased ambulance visits and ALC patient numbers. It was reported that 30-35 extra additional beds have been open since Christmas.</li> <li>• J. Loncke noted that a potential labour disruption may occur at the CCAC. Talks are currently ongoing. Contingency plans are currently in place. A communication will be sent to all staff shortly to apprise them of the situation.</li> <li>• In response to a query, it was noted that the Auditor General's Report for Ontario Association of Nursing Homes was received in 2014 and clarity was requested on what recommendations have been implemented to date.</li> </ul>



Subject	Discussion
<p><b>5.4 REPORT OF PRESIDENTS</b></p> <p><b>SJHH FOUNDATION</b></p> <p><b>SJVD FOUNDATION</b></p>	<ul style="list-style-type: none"> <li>• The Foundation is working with SJHH to identify capital campaign priorities. After the hospital master plan is completed, it was noted that three key areas will be focused on: research, equipment and mental health funding.</li> <li>• It was noted that 29 corporate teams have registered to date for The Around the Bay Road Race, occurring on March 29<sup>th</sup>. The event launch will occur on February 3<sup>rd</sup> at the Carstar Head Office on Stone Church Road.</li> <li>• The Anne and Neil McMaster Research Award Dinner will be held on February 25<sup>th</sup>. The recipient of this year's award is Dr. Nabil Seidah, who is being recognized for his work in biochemical neuroendocrinology.</li> <li>• In honour of the Feast of St. Joseph, various local restaurants are joining forces to support St. Joe's. Dining at one of these establishments between February 19 and March 19 will result in 10% of food sales being donated to support St. Joseph's Healthcare Hamilton.</li> </ul> <ul style="list-style-type: none"> <li>• Twelve residents have moved into the new Orchid Garden, following the final inspection of the MOHLTC.</li> <li>• The SJVD Foundation has exceeded its \$2M goal and the focus will now be on major gifts to address the Villa's lengthy capital list.</li> <li>• The Foundation Board has established a committee to begin work on the next Strategic Plan which will include succession planning. This process should be completed by late Spring.</li> <li>• The SJVD Foundation's Annual Gala "The Golden Age of Hollywood" will be held on Friday May 1<sup>st</sup> at Liuna Station. Tickets are \$175 and may be obtained by contacting the Foundation offices.</li> </ul>
<p><b>5.5 REPORT OF CHIEF NURSING OFFICER</b></p>	<ul style="list-style-type: none"> <li>• There was no report.</li> </ul>
<p><b>5.6 REPORT OF PRESIDENT, MEDICAL STAFF ASSOCIATION</b></p>	<ul style="list-style-type: none"> <li>• The Medical Staff Executive Annual Dinner was held on January 16<sup>th</sup>.</li> <li>• The Sister Joan O'Sullivan Award was presented to Dr. J.E.M. Young.</li> <li>• C. Horner noted that the MSE will be carrying out a "road show" in the next several months, with MSE members attending rounds in the various departments.</li> </ul>
<p><b>6. INFORMATION EDUCATION ITEMS</b></p>	<ul style="list-style-type: none"> <li>• JBG Closed Summary</li> <li>• JBG Walkabouts – Education Schedule</li> <li>• The Value of System Thinking</li> </ul>
<p><b>7. OTHER BUSINESS</b></p>	<p>There was no further business.</p>
<p><b>8. ADJOURNMENT</b></p>	<p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p><b>THAT THE OPEN SESSION OF THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE ADJOURNED</b></p>

Subject	Discussion
	<p>Carl Santoni, Chair</p> <p> David Higgins, Secretary</p> <p> Fadia Ros, Recorder</p>

**St. Joseph's Hamilton Joint Boards of Governors (JBG)**

**Summary of December 18<sup>th</sup>, 2014 Closed Meeting Session**

**Motions Summary**

Recommending Committee	Motion
The Medical Advisory Committee	<p>It was voted that the:</p> <ul style="list-style-type: none"> <li>▪ Minutes of the Medical Advisory Committee of December 4<sup>th</sup>, 2014 be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members).</li> <li>▪ Recommendations on Research of the December 4<sup>th</sup>, 2014 Medical Advisory Committee be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members).</li> <li>▪ Recommendations on Credentials of the December 4<sup>th</sup>, 2014 Medical Advisory Committee be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members).</li> </ul>

**Presentations and Reports to the JBG – Summary**

Mr. Mark Farrow, Vice President and Chief Information Officer, St. Joseph's Healthcare Hamilton provided an update on the St. Joe's "Re Fresh Technology" strategic plan, which has a vision of making strategic investments in health information technology to enable a culture of collaboration and excellence through the use of proven and innovative technologies that meet the changing needs of our community. Core to this strategy is the implementation of key components of an EHR including Clinical Order Sets, Document Scanning, Computerized Physician Order Entry (CPOE), Closed Loop Medication Administration, Clinical Documentation, and Clinical Decision Support. Updates were provided on status of key ICT projects, as well as opportunities for increased alignment/communication with partner organizations in order to better serve patients who use services throughout Hamilton and the LHIN.



**GOVERNANCE, MISSION AND VALUES (GMV) COMMITTEE of the  
St. Joseph's Hamilton Joint Boards of Governors (JBG)**

**GOVERNANCE, MISSION AND VALUES (GMV) COMMITTEE OF THE  
St. Joseph's Hamilton Joint Boards of Governors (JBG)**

- Summary of the February 3, 2015 Meeting -

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**The Committee discussed the following standing agenda items:**

- Preview of February Board Agenda
- Selection of Generative Topic for February Board Meeting
- Review of January Board Meeting Evaluation
- Review of January GMV Meeting Evaluation
- Review of Board Closed Session Summary
- Tracking Tool: 2014/15 Governance Work Plan
- Education Item: Not-for-Profit Governance Boot Camp Summary

**The Committee discussed the following new business:**

**Posting of Materials on Board website**

- The content of Board business posted on the SJHH Board website was discussed. The committee discussed the need to make available on our website pertinent Board documents, decisions and information to our stakeholders. Management will increase materials posted on our website over the February and March Board cycles and will bring back to the Committee for review.

**Nominating Committee Update**

- The Nominating Committee is meeting to review Board and Committee membership for the 2015-16 Board year. Current and anticipated vacancies will be reviewed and addressed. The committee will also bring forward recommendations related to Board member education for any individual taking on a new role or membership on a new committee.

**Legislative Compliance Review**

- The Committee reviewed the 2014-15 Legislative Compliance Certificate, which has been signed off by Management. This review will take place every two years.

**Board Peer Review Process**

- The Committee endorsed moving forward with the annual Board Peer Review Process for any member entering into the final year of a renewable term (as per JBG Policy #22). The performance of individual members of the Board will be reviewed to identify areas of strength as well as areas for development and to determine the most appropriate committee membership. There are currently eight individual board members who will undergo a peer review this year.

**Annual Report to SJHS:**

- The Board will be making its annual presentation to the SJHS Board later this month. The update will focus on governance updates, strategic planning updates, as well as anticipated opportunities and pressures.

**Quarterly Report to SJHS**

- The Committee reviewed the quarterly to the SJHS and endorsed this to move forward to the SJHS Board.

**Review/Renew JBG Policies**

- The following policies were brought forward for review and approval:
- JBG#7 – Community Representation (Non-Board Members) on JBG Committees
- JBG#8 – JBG – Governance Approach
- JBG#9 – JBG Position Description for Trustees
- JBG#22 – Board Peer Review Policy & Process

**Accreditation Update – Governance Meeting**

- The Committee discussed preparation for the upcoming SJHH Accreditation and the governance meeting between the Board and Accreditation Canada Surveyors. Attendees for this meeting were discussed.

<b>Policy Name:</b> Community Representation (Non Board Members) On JBG Committees	
<b>Policy Number – (JBG or voting organization – number - approval year):</b> JBG - #7 - 2015	<b>Cross Reference:</b> SJHH, SJVD, SJHC Administrative By-laws
<b>Replaces:</b>	<b>Pages:</b> 1 of 2
<b>Approved by:</b> St. Joseph's Hamilton Joint Boards of Governors (JBG)	<b>Recommended by:</b> Governance Mission & Values Committee of the JBG
<b>Approved on:</b>	<b>Recommended on:</b> February 3, 2015

## 1.0 Purpose

- 1.1** We value input and feedback from community members who live and/or work in the communities served by the St. Joseph's Hamilton Joint Boards of Governors (JBG). We also value the perspective they bring from the broader community which enriches their contributions to the deliberations and policy planning of Committees of the JBG.

Committee members are expected to conduct themselves in an ethical and professional manner. This commitment includes proper use of authority and appropriate decorum in group and individual behaviour. They are expected to support decisions made at Board committees and comply with all bylaws and policies of JBG member organizations (SJHH, SJVD, and SJHC).

Community members must avoid any conflict of interest with respect to fiduciary responsibilities. Any conflict of interest must be declared either verbally or in writing at the beginning of any meeting. Community members shall refrain from discussing and voting in respect to the matter on which a conflict has been declared.

## 2.0 Recruitment

- 2.1** JBG Committees: Annually, the JBG determines the number of vacancies and expertise required to fill community member positions on JBG committees. Advertisements may be placed in local newspapers to recruit community members and various agencies may be approached to identify potential candidates. Individuals are asked to complete an application form and or curriculum vitae if they are interested in being a member of a particular Board committee. The Nominating Committee of the JBG then interviews candidates and recommends candidates to the JBG for approval. Should a community member vacate his/her position, the committee Chairs and resource persons may interview candidates to fill the vacated positions.
- 2.2** Ad Hoc Committees: Recruitment is focused on individuals with specific task related expertise needed to carry out the functions of the committee. Membership shall be reviewed on an annual basis to determine whether different skill sets are required as different phases of the committee work progresses.

### **3.0 Criteria Used in Selection of Community Members for JBG Committees**

- 3.1 Personal value system that would enable commitment to endorse, support and promote the values expressed in the Mission and Vision statement of the JBG and SJHH, SJVD, SJHC
- 3.2 Honesty and integrity
- 3.3 Broad based interest in volunteer community services
- 3.4 Appropriate skills and expertise
- 3.5 Interest in and commitment to healthcare and betterment of the community
- 3.6 Aptitude for group problem solving and decision making relative to complex and multifaceted issues
- 3.7 Ability to conceptualize significant issues affecting health care and SJHH, SJVD, SJHC
- 3.8 Ability to communicate effectively
- 3.9 An absence of potential conflicts of interest and ability to recognize and manage potential conflicts of interest
- 3.10 Ability to attend orientation and participate in continuing education
- 3.11 Abide by the Privacy and Confidentiality policies
- 3.12 Ability to attend at least 80% of all regularly scheduled committee meetings

### **4.0 Term of Appointment**

- 4.1 One two (2) year term which is reviewed on an annual basis
- 4.2 Option of a second two (2) year term

### **5.0 Voting**

- 5.1 Community members of the JBG Committees have full voting privileges at the Committee level.

### **6.0 Criteria Used in Selection of Community Members for Ad Hoc Committees of the Board**

- 6.1 Personal value system that would enable commitment to endorse, support and promote the values expressed in the Mission and Vision statement of the hospital
- 6.2 Honesty and integrity
- 6.3 Appropriate skills and expertise
- 6.4 Interest in and commitment to healthcare and betterment of the community
- 6.5 Ability to communicate effectively
- 6.6 An absence of potential conflicts of interest and ability to recognize and manage potential conflicts of interest
- 6.7 Abide by the Privacy and Confidentiality policies
- 6.8 Recognized expertise in his/her field as related to the purpose of the ad hoc committee
- 6.9 Team player and good interpersonal skills
- 6.10 Ability to attend at least 80% of all regularly scheduled committee meetings



<b>Policy Name: JBG – Governance Approach</b>	
<b>Policy Number</b> (JBG or voting organization – number - approval year): JBG - #8 - 2015	<b>Cross Reference:</b> SJHH, SJVD, SJHC Administrative By-laws
<b>Replaces:</b>	<b>Pages:</b> 1 of 1
<b>Approved by:</b> St. Joseph's Hamilton Joint Boards of Governors (JBG)	<b>Recommended by:</b> Governance Mission & Values Committee of the JBG
<b>Approved on:</b>	<b>Recommended on:</b> February 3, 2015

## 1.0 Policy Statement

**1.1** The JBG and member Boards of the JBG shall approach its task in accordance with the principles of good governance and the JBG Mission, Vision and Values. The JBG is committed to emphasizing outward vision; encourages diversity in viewpoints; provides strategic leadership; clearly distinguishes between JBG and Management roles; and, makes collective decisions which are proactive and future oriented.

**1.2** More specifically, the JBG shall:

- 1.2.1 Operate in all ways mindful of its stewardship in the context of overall population health, education of health care professionals and research to advance the frontiers of health care
- 1.2.2 Be an initiator of policy
- 1.2.3 Direct and guide the establishment of organizational Values, Mission and Vision
- 1.2.4 Monitor organizational performance
- 1.2.5 Intentionally recruit expertise, as required, for committees to carry out the work of the JBG
- 1.2.6 Focus on long term outcomes including recruitment and retention of health professionals, and the health of the community
- 1.2.7 Use the expertise of individual JBG members to enhance performance of the Board
- 1.2.8 Be responsible for JBG performance and JBG evaluation

Policy Name: JBG Position Description for Trustees	
<b>Policy Number</b> (JBG or voting organization – number - approval year): JBG - #9 - 2015	<b>Cross Reference:</b> SJHH, SJVD, SJHC Administrative By-laws
<b>Replaces:</b>	<b>Pages:</b> 1 of 3
<b>Approved by:</b> St. Joseph's Hamilton Joint Boards of Governors (JBG)	<b>Recommended by:</b> Governance Mission & Values Committee of the JBG
<b>Approved on:</b>	<b>Recommended on:</b> February 3, 2015

### 1.0 Purpose

- 1.1 The JBG is committed to ensuring that it achieves standards of excellence in the quality of its governance.
- 1.2 All references to the role of a Trustee of the JBG in this policy include responsibilities to individual Boards of the JBG to which the Trustee is appointed as determined by bylaws and policies.

### 2.0 Policy Statement

- 2.1 The organization has adopted this policy describing the duties and expectations of Trustees to maintain those standards.

### 3.0 Procedure

This policy applies to all elected and ex-officio Trustees and is provided to all Trustees before they are appointed to the member Boards of the JBG. A Trustee who wishes to serve on the JBG must confirm in writing that he or she will abide by this policy.

As a member of the JBG and in contributing to the collective achievement of the role of the JBG, the individual Trustee is responsible for the following:

#### **3.1 Fiduciary Duties**

Each Trustee is responsible to act honestly, in good faith, and in the best interest of the organization and, in so doing, to support the agency in fulfilling its mission and vision and in discharging its accountabilities.

A Trustee shall apply the level of skill and judgment that may reasonably be expected of a person with his or her knowledge and experience.

#### **3.2 Accountability**

A Trustee is not solely accountable to any special group or interest and shall act and make decisions that are in the best interests of the JBG as a whole. A Trustee shall be knowledgeable of the stakeholders to whom the organization is accountable. They shall appropriately take into account the interests of such stakeholders when making decisions as a Trustee, but shall not prefer the interests of any one group if to do so would not be in the best interest of JBG.

### **3.3 Education**

A Trustee shall be knowledgeable about:

- The operations of the organization;
- The health care needs of the community served;
- The duties and expectations of a Trustee;
- The JBG's governance role;
- The JBG's governance structure and processes;
- The JBG's governance policies; and,
- The organization's policies applicable to JBG Members.

A Trustee will participate in JBG orientation sessions, JBG planning retreats and JBG education sessions.

### **3.4 Teamwork**

A Trustee shall develop and maintain sound relations and work cooperatively and respectfully with the JBG Chair, Members of the JBG and Senior Management.

### **3.5 Community Representation and Support**

A Trustee shall represent the JBG and the organization in the community when asked to do so by the JBG Chair. JBG Members shall provide support to the fundraising efforts of the JBG in accordance with their means and shall support the organization through sponsored events.

### **3.6 Time and Commitment**

A Trustee is expected to commit the time required to perform JBG and Committee duties. It is expected that a Trustee will devote a minimum of between 8-12 hours per month.

### **3.7 Contribution to Governance**

Trustees are expected to make a contribution to the governance role of the JBG through:

- Reading materials in advance of meeting and coming prepared to contribute to discussion;
- Offering constructive contributions to the JBG and Committee discussions;
- Contributing his or her special skills, knowledge and expertise;
- Respecting the views of other members of the JBG;
- Voicing conflicting opinions during JBG and Committee meetings but respecting the decisions of the majority even when the Trustee does not agree with the decision;
- Respecting the role of the Chair; and,
- Participating in JBG evaluations and annual performance reviews.

### **3.8 Continuous Improvement**

A Trustee shall commit to be responsible for continuous self-improvement. A Trustee shall receive and act upon the result of the JBG evaluation in a constructive and positive manner.

### **3.9 Terms and Renewal**

A Trustee is appointed for a term of three years and normally may serve a maximum of nine years. A Trustee's renewal for each term is not automatic and shall depend on the Trustee's performance.

**3.10 Declaration**

All trustees and committee members of the JBG shall sign the “Declaration of Commitment to Mission and Confidentiality and Disclosure of Relationships with Member Organization Vendors” (JBG Policy #18) upon appointment and renewal of terms.

<b>Policy Name: Board Peer Review Policy &amp; Process</b>	
<b>Policy Number</b> (JBG or voting organization – number - approval year): JBG - #22 - 2015	<b>Cross Reference:</b>
<b>Replaces:</b>	<b>Pages:</b> 1 of 2
<b>Approved by:</b> St. Joseph's Hamilton Joint Boards of Governors (JBG)	<b>Recommended by:</b> Governance, Mission & Values Committee of the JBG
<b>Approved on:</b>	<b>Recommended on:</b> February 3, 2015

## 1.0 Policy Statement

The St. Joseph's Hamilton Joint Boards of Governors (JBG) is committed to governance best practices. The performance of individual members of the Board will be reviewed to identify areas of strength as well as areas for development and to determine the most appropriate committee membership.

## 2.0 Process

The Process for the Board Peer Review is as follows:

- 2.1 Each member (JBG members and community members) who is entering the final year of a renewable term will be reviewed. Members who are currently serving the final year of the maximum allowable years on the Board will not be reviewed.
- 2.2 The review will be completed in February of each year using a web based version of the JBG Peer Review Form (see below). The members being reviewed will be asked to rate themselves. All other members will be asked to complete a review of the individuals being reviewed as outlined in the JBG Peer Review Form. Information will be collated.
- 2.3 The Board Chair and Vice Chair will provide feedback to individual Board members and will discuss plans and available resources for member development and appropriate committee membership. Feedback will consist of both verbal feedback as well as a one page summary of the peer reviews.
- 2.4 The results of the individual Board member review will be taken into account when considering renewal terms for incumbent members.
- 2.5 A mentor may be assigned to all new Board members and will provide feedback during the first year of a term.
- 2.6 To ensure confidentiality, administration of the evaluation survey will be managed by the Board Chair and will not be reviewed by the Senior Leadership at any of the JBG organizations.

### St. Joseph's Hamilton Joint Boards of Governors Peer Review Form\*

Name of Member to be reviewed: \_\_\_\_\_

Name of Member Completing: \_\_\_\_\_ Date: \_\_\_\_\_

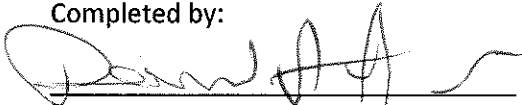
Performance Indicators	1	2	3	4	N/A	Comments
Approaches all agenda items from the stance of upholding the organization's mission, vision and values and strategic directions.						
Comes prepared for Board and Committee meetings.						
Actively engaged at meeting.						
Asks appropriate questions.						
Communicates respectfully in offering alternative views.						
Supports and promotes activities of the JBG and SJHS. - Ex: Foundation events, education sessions, recognition dinners, walkabouts						
Contributes meaningfully and knowledgeably to Board/Committee discussion.						
Tends to be innovative and suggests new ideas.						
Listens well and respects those with differing opinions.						
Thinks strategically and generatively in assessing the situation and offering alternatives.						
Has a good working relationship with JBG Members and Community members.						
Demonstrates respect for the role of Board Committees.						
Demonstrates respect for the role of the Chair.						
Demonstrates respect for the role of Senior Management.						
Applies and contributes his/her special skills, knowledge or talent to the issues.						
Supports Board decisions – acts as one on all Board actions once the decision has been made.						
Appears to understand key performance indicators for Board oversight, e.g. quality and financial indicators.						
Interested in serving as Board Chair.						
Scoring	Scoring Definitions					
1 = Does not meet expectations	<i>Rarely/never</i>					
2 = Partially meets expectations.	<i>Occasionally/sometimes</i>					
3 = Meets expectations	<i>Consistently/regularly</i>					
4 = Exceeds expectations	<i>Always</i>					
N/A = Unable to assess	<i>Don't know/not observed</i>					

Please provide any additional comments you wish to make on any of your evaluations.

## 2014-15 Legislative Compliance Certificate

St. Joseph's Healthcare Hamilton, St. Joseph's Home Care and St. Joseph's Villa Dundas are operating in compliance with relevant statutory obligations as advised by legal counsel, including, but not limited to those outlined below.

Completed by:



Dr. David A. Higgins  
President St. Joseph's Healthcare Hamilton  
Secretary, St. Joseph's Hamilton Joint Boards of Governors

2015/1/4

Date

### St. Joseph's Healthcare Hamilton:

- ✓ Broader Public Sector Accountability Act, 2010
- ✓ Accessibility for Ontarians with Disabilities Act
- ✓ Health Care Consent Act, 1996
- ✓ Mental Health Act
- ✓ Patient Restraints Minimization Act
- ✓ Public Guardian and Trustee Act
- ✓ Substitute Decisions Act, 1992
- ✓ Charities Accounting Act, RSO 1990, c C.10
- ✓ Corporations Act (Ontario), RSO 1990, c C.38
- ✓ Electronic Commerce Protection Act, SC 2010, c 23
- ✓ Criminal Code
- ✓ Mandatory Gunshot Wounds Reporting Act, 2005
- ✓ Employment Insurance Act
- ✓ Employment Standards Act, 2000
- ✓ Human Rights Code
- ✓ Labour Relations Act
- ✓ Occupational Health and Safety Act
- ✓ Pay Equity Act
- ✓ Workplace Safety and Insurance Act
- ✓ Dangerous Goods Transportation Act
- ✓ Environmental Protection Act (Ontario)
- ✓ Human Pathogens and Toxins Act
- ✓ Technical Standards and Safety Act, 2000
- ✓ City of Hamilton Sewer-Use By-Law – 04-150
- ✓ Pesticides Act
- ✓ Ontario Water Resources Act

- ✓Waste Diversion Act
- ✓Fire Protection and Prevention Act
- ✓City of Hamilton By-Law No. 11-285 Noise Control By-Law
- ✓Health Protection and Promotion Act
- ✓Regulated Health Professions Act
- ✓Commitment to the Future of Medicare Act, 2004
- ✓Health Insurance Act
- ✓Local Health System Integration Act, 2006s
- ✓Ambulance Act
- ✓Anatomy Act
- ✓Child and Family Services Act
- ✓Coroners Act
- ✓Laboratory & Specimen Collection Centre Licensing Act
- ✓Trillium Gift of Life Network Act
- ✓Vital Statistics Act
- ✓Canada Pension Plan
- ✓Pension Benefits Act
- ✓Controlled Drugs and Substances Act
- ✓Food and Drugs Act
- ✓Narcotics Safety & Awareness Act
- ✓Ontario Drug Benefit Act
- ✓Building Code Act, 1992
- ✓Municipal Codes (e.g. Hamilton)
- ✓Healing Arts Radiation Protection Act
- ✓Nuclear Safety and Control Act
- ✓Occupiers Liability Act
- ✓Smoke-Free Ontario Act
- ✓Freedom of Information and Protection of Privacy Act
- ✓Personal Health Information Protection Act
- ✓Public Sector Salary Disclosure Act
- ✓Excellent Care for All Act, 2010
- ✓Quality of Care Information Protection Act, 2004
- ✓Employer Health Tax Act
- ✓Excise Tax Act (Canada)
- ✓Income Tax Act (Canada)
- ✓Taxation Act, 2007
- ✓Public Hospitals Act
- ✓Hospital Labour Disputes Arbitration Act

**St. Joseph's Home Care:**

- ✓Accessibility for Ontarians with Disabilities Act
- ✓Health Care Consent Act
- ✓Substitute Decisions Act
- ✓Criminal Code
- ✓Charities Accounting Act
- ✓Criminal Code
- ✓Employment Insurance Act (EIA)
- ✓Employment Standards Act (ESA)



- ✓ Human Rights Code (HRC)
- ✓ Labour Relations Act (LRA)
- ✓ Occupational Health and Safety Act (OHS)
- ✓ Pay Equity Act
- ✓ Workplace Safety and Insurance Act
- ✓ Fire Protection and Prevention Act
- ✓ Health Protection and Promotion Act
- ✓ Regulated Health Professionals Act
- ✓ Child and Family Services Act
- ✓ Canada Pension Plan (CPP)
- ✓ Pension Benefits Act
- ✓ Smoke-Free Ontario Act
- ✓ Personal Health Information Protection Act
- ✓ Public Sector Salary Disclosure Act
- ✓ Employer Health Tax Act (EHT)
- ✓ Excise Tax Act (Canada)

**St. Joseph's Villa Dundas:**

- ✓ Ontario Long Term Care Homes Act 2007, and Regulations 79/10
- ✓ Accessibility for Ontarians with Disabilities Act 2005
- ✓ Health Care Consent Act 1996
- ✓ Substitute Decisions Act 1992
- ✓ Employment Standards Act 2000
- ✓ Human Rights Code 1990
- ✓ Labour Relations Act 1995
- ✓ Occupational Health And Safety Act (and regulations 860 – WHMIS, 67-93 – Health Care and Residential Facilities, 474/07 – Needle Safety)
- ✓ Pay Equity Act 1990
- ✓ Public Sector Compensation Restraint to Protect Public Services Act, 2012
- ✓ Workplace Safety and Insurance Act 1997
- ✓ Regulated Health Professionals Act 1991
- ✓ Coroners Act 1990
- ✓ Smoke-Free Ontario Act 1994
- ✓ Personal Health Information Protection Act 2004
- ✓ Public Sector Salary Disclosure Act 1996
- ✓ Quality of Care Information Protection Act 2004



**RESOURCE & AUDIT COMMITTEE of the  
St. Joseph's Hamilton Joint Boards of Governors (JBG)**

## Board Report

### Resource and Audit Committee Meeting (Feb. 18, 2015)

#### 4.1 KPMG Audit Report – SJHH & SJHC

KPMG provided the Committee with an overview of the Audit Planning Report for the year ending March 31, 2015. The report provides an overview of the audit plan for St. Joseph's Healthcare Hamilton and St. Joseph's Home Care.

#### 4.2 Ethics Reporting Update – SJHH, SJHC & SJVD

A brief update from the Confidential, Anonymous Reporting for Employees (CARE) program was provided.

#### 5.1 SJHH Foundation Update

An update was provided from St. Joseph's Healthcare Foundation focusing on the Year in Review 2014-2015 as part of the largest campaign undertaken and aimed at telling the SJHH story and supporting key fund raising priorities through the "Timeless Care Tomorrow's Discoveries" campaign.

- the Foundation highlighted a number of new initiatives that have been undertaken:
  - new identity focusing on patient care & research "Hope Healing Discovery"
  - Healing Garden at the West 5<sup>th</sup> site
  - Gifts of Caring donation catalogue
  - Cup of Joe – portion of Monday coffee sales from three coffee houses
  - Grateful Patient Program
  - annual Mental Health Morning Breakfast – May 6, 2015
  - Feast of St. Joseph's running from February 19-March 19, 2015 with 10% of all food purchases from 12 local restaurants being donated
  - Around the Bay Road Race – March 29, 2015

#### 5.2 SJHH Year End Forecast

A high level overview of the SJHH Year-End Forecast was provided where the forecasted position was compared to the prior year.

While the forecast has not been finalized, the most significant items were discussed in more detail and these included:

- other revenue – significantly impacted by investment income
- PCOP liability – significantly impacted by Year 2 volumes (IP and OP)
- other pressures – significantly impacted by the addition of temporary medical beds during January and February

#### 5.3 HAPS/H-SAA Update

A high level overview of the SJHH HAPS/H-SAA was discussed with the focus of the discussion on the potential funding gap for 2015-2016 and 2016-2017. The Committee reviewed the potential impact of such a significant gap in terms of staff, quality patient care and access to services. It was noted that this pressure and the impact is not unique to SJHH. The discussion focused on the importance of fiscal sustainability and that SJHH may need to redefine what service it can deliver and how to deliver it effectively and safely.

#### 6.2 HSFR Update

As part of a continuing effort to keep the Committee informed on the Health System Funding Reform (HSFR) initiative, a presentation entitled "Eye on Quality" was discussed.

- implementation of HSFR has tied data quality to funding through Health Based Allocation Model (HBAM) and Quality Based Procedures (QBPs) and highlights the importance of accurate documentation and coding



**MEDICAL ADVISRY COMMITTEE**

REPORT OF MEDICAL ADVISORY COMMITTEE  
FEBRUARY 2015

Approved at the February 5th, 2015 MAC

1. Credentials Committee Recommendations of January 16, 2015.
2. Hamilton Integrated Research & Ethics Board (HIREB) Minutes & Recommendations of December 3 (Panel B) & December 16 (Panel A), 2014.
3. Pharmacy & Therapeutics (P&T) Committee Recommendations;
  - Request for Change in Formulary Status – Sodium Ferric Gluconate
  - Addition of Lidocaine 2% Chlorhexidine 0.05% gel to the SJHH Formulary

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**Other Items to Note:**

1. Search Committees approved for: Chief of Department of Laboratory Medicine and Chief of Medicine.
2. New Hospitalist begins in the Department of Medicine on February 1<sup>st</sup>, 2015.
3. Critical Care Department is reviewing EEG Monitoring to capture seizures in patients by enhancing training for both nurses and physicians.
4. Department of Eye Medicine & Surgery held their first ever Research Day on February 11, 2015.
5. Department of Physical Medicine and Rehabilitation has hired a new Nurse Practitioner to replace the previous one.
6. Digital Order Sets were recently implemented in the Department of Anesthesia and well received.
7. New Pilot initiative in Diagnostic Imaging called "Rapid Turnaround" to expedite communication for biopsy results to breast cancer patients.
8. Hand Hygiene statistics being reviewed to compare strategies in successful departments against non-successful departments to assist those departments in meeting the same high standards.
9. Presentation by Dr. Lydia Hatcher, Chief – Department of Family Medicine on "Healthlinks".
10. An announcement will be forthcoming with respect to the new Psychiatrist-in-Chief for St. Joseph's Healthcare Hamilton.
11. There will be a Health System Funding Reform presentation held on March 2<sup>nd</sup> with Chiefs and Heads of Service invited to attend.
12. There will be Root Cause Analysis (RCA) Training for Chiefs, Directors and Managers that will begin in early March as part of Accreditation. Sessions will be provided by Safe Medication Practices Canada (ISMP Canada).
13. The Public Health Services Reportable Diseases Fax Machine was down on February 5, 2015 between 9:56 am and 2:00 p.m. and asked all departments to "re-fax" anything sent during that time to the new number provided.
14. Chief of Staff recruitment/model is being reviewed and discussed by the Board and MAC voting members.
15. It has been one year since the opening of the new West 5<sup>th</sup> Campus and things are proceeding well with only minor glitches.
16. Funding from the MOH will be forthcoming for 10 hospitals to have Integrated Comprehensive Care "like" projects beginning in March 2015.
17. The next Professional Staff Association Quarterly Meeting is on March 24<sup>th</sup> with Drs. I. Preyra and T. Packer as keynote speakers.

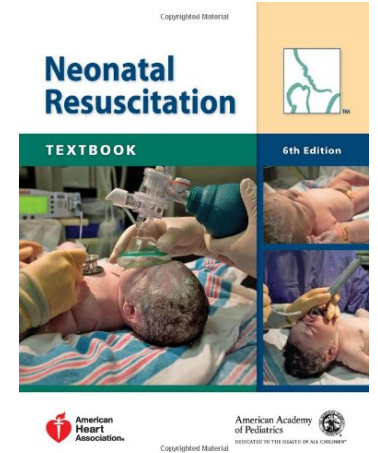
# PRESENTATION TO ST. JOSEPH'S HAMILTON JOINT BOARD OF GOVERNORS COMMITTEE



- **Simulation of Neonatal Resuscitation:  
Does Practice Make Perfect?**
- Dr. Sandi Seigel
- Deputy Chief : Division of General Pediatrics~
- Department of Pediatrics
- Feb 26, 2015

# Neonatal Resuscitation

- All providers of newborn care at St. Joseph's are required to pass the Neonatal Resuscitation Program created by the American Heart Association the American Academy of Pediatrics and endorsed by the Canadian Paediatric Society and recertify once every 1-2 years
- 10 % of babies born will need some type of resuscitation and 1% will require extensive resuscitation ( approximately 35-40 /year)
- The Challenge : How to maintain the skills learned on an ongoing basis



# Retrieval and Knowledge Transfer

- We assume as teachers once something is learned and tested it should be available from memory to solve problems - it will “transfer”
- If association between knowledge and context does not exist, it likely will not transfer ( remember the brain is ALL about meaning)

Norman, G. (2009). Teaching basic science to optimize transfer, *Medical Teacher* (31), 9 : 807 -811.

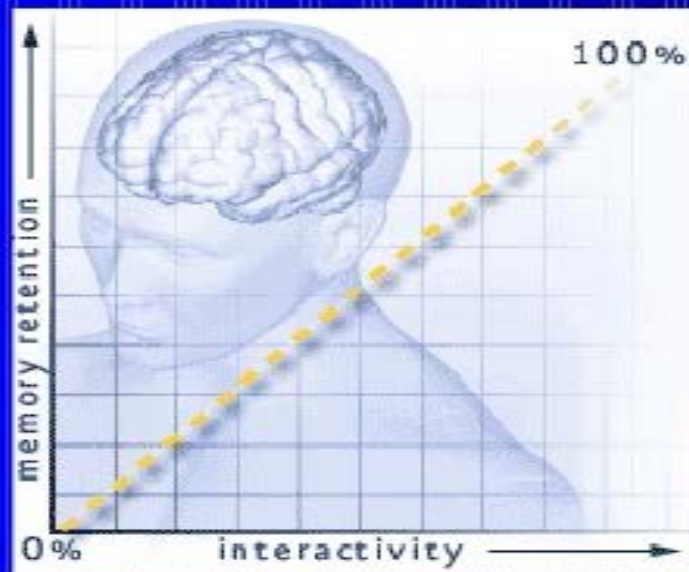


# Principles of Education

- “Adult education principles” ( first described by Malcolm Knowles 1971) is not a theory and has never been confirmed through educational research. Nor has “learning styles”
- Education is an ***experience*** and must be relevant in order to have meaning
- Learning depends on ***active involvement*** and practice specificity
- Feedback is critical

# Human Learning: Level of Interactivity

## Why Use Simulations?



### Retention

Teach Others	90%	Collaborative Simulations
Learn By Doing	75%	Simulations
Discussion Groups	50%	Web Seminars, IM, chat
Demonstration	30%	Animation
Audio Visual	20%	PowerPoint Slides
Lecture	5%	Streaming media

Source: Andersen Consulting

- **Interaction** is associated with learning achievement and retention of knowledge
- Participants **learned faster** and had **better attitudes** when they used an interactive instructional environment

Najjar, L. J. (1998). Principles of educational multimedia user interface design. *Human Factors*, 40(2), 311-323.

# ADVANTAGES OF SIMULATION

- Freedom to make mistakes and to learn from them in a **safe, non-threatening environment**
- Address **hands-on** and critical thinking skills, including, procedures, decision-making, and effective communication
- Assess and enhance **teamwork** behaviors during critical situations
- Use **real clinical environment** and locations and repeat as often as necessary.

# Back in the Day.....



# Fast forward 50 years

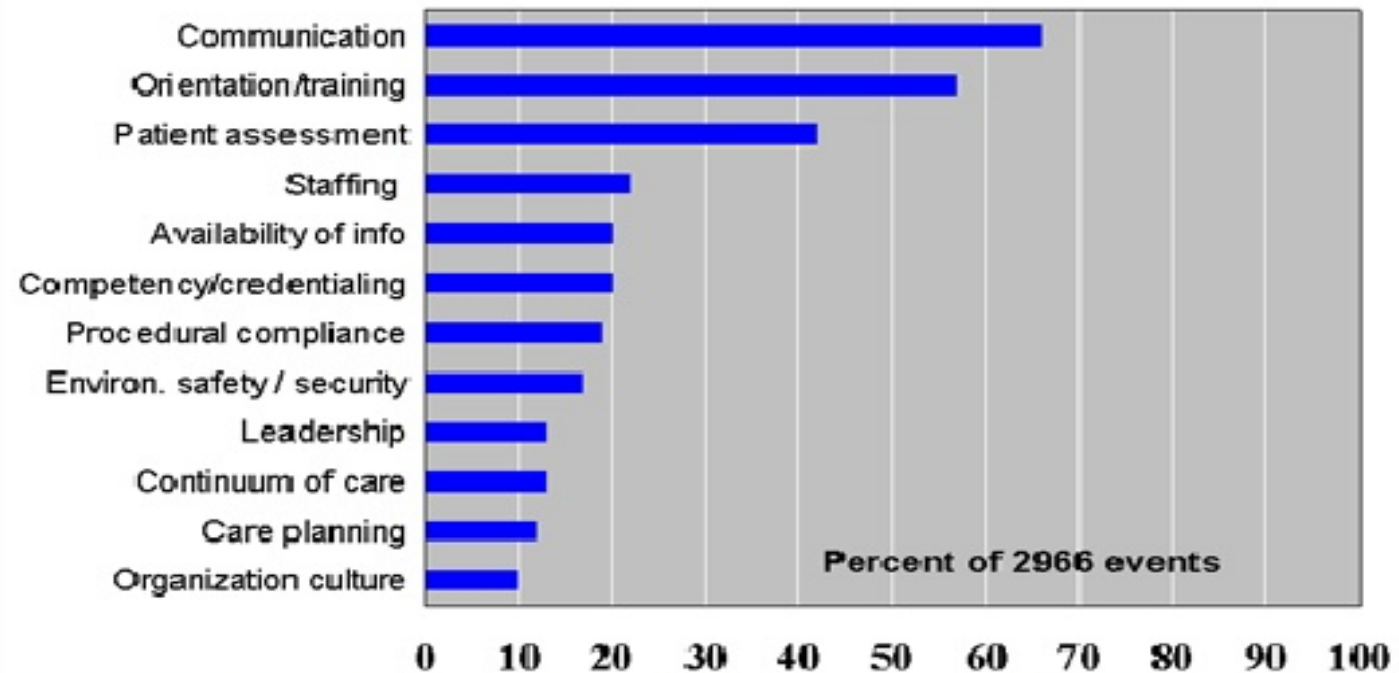
- Traditional system of occasional “mock codes”
- Inter-professional learning not the norm
- Did not focus on debrief
- Did not loop back to quality initiatives to ensure improvement
- Not strong enough emphasis on “TEAM”



# Why focus on the team?--Factors Involved in Adverse Medical

## Root Causes of Sentinel Events

(All categories; 1995-2004)



Available at [www.jcaho.org](http://www.jcaho.org)

# DEBRIEFING

Originated in the military

Used by emergency first responders  
( critical incident debriefing)

Variety of debriefing techniques used in  
health care

Video playback is one method

# Tracking simulations

2014

## Women's & Infants' Program Quality Indicators:

Indicator	Target		Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
<b>Mother-Baby Unit</b>	Hand Hygiene Moment 1	95%	Higher is better	80.00%	86.40%	909%	100.00%	94.70%	86.70%	95.30%	86.40%	100%	88.90%		
	Hand Hygiene Moment 4	95%	Higher is better	93.80%	100%	93.90%	100.00%	100.00%	96.40%	100%	90.90%	100%	95.80%		
<b>SCN</b>	Hand Hygiene Moment 1	90%	Higher is better	95.80%	94.70%	100%	100.00%	96.00%	94%	93.80%	88.90%	95.70%	95.30%		
	Hand Hygiene Moment 4	90%	Higher is better	95.20%	100%	100%	100.00%	100.00%	100%	100%	94.70%	85.00%	91.70%		
<b>Birthing</b>	Hand Hygiene Moment 1	90%	Higher is better	100%	100%	100%	100.00%	100.00%	96%	100%	91.70%	100%	100.00%		
	Hand Hygiene Moment 4	90%	Higher is better	100%	100%	100%	100.00%	100.00%	100%	100%	100.00%	100%	100.00%		
<b>BFI</b>	Exclusive Breastfeeding + medical supp.	75%	Higher is better	77.30%	76.14%	72.90%	76.50%	75.40%	77.00%	78.70%	79.10%	76.70%	81.67%		
	Breastfeeding Supplementation Rate	10%	Lower is better	38.98%	41.18%	41.00%	30.51%	44.60%	39.60%	33.60%	60.00%	33.30%	40.18%		
<b>Newborn Readmit</b>	Number of Births	-		291	258	279	242	282	265	307	332	295	295	252	
	Readmission Rate (<10 days)	-	Lower is better	3.44%	1.55%	3.58%	0.83%	2.13%	4.53%	1.95%	2.71%	2.37%	1.69%	1.98%	
	Phototherapy	-	Lower is better	9	3	9	2	6	10	6	9	7	3	5	
	Feeding/Weight/Other	-	Lower is better	1	1	1	0	0	2	0	0	0	2	0	
<b>Incidents</b>	Medication/Fluid-related Incidents	0	Lower is better	2	0	1	0	1	0	1	1	0	0	2	
	Blood or Lab Incidents - ID/Labeling	0	Lower is better	0	5	0	2	2	3	4	4	0	4	1	
	Lab Incidents - Poor specimen quality	0	Lower is better	18	32	28	44	40	27	25	51	30	24	16	
<b>Falls</b>	Patient Falls	0	Lower is better	0	1	0	0	0	0	0	1	2	0	1	
<b>SSCL</b>	Safe Surgical Checklist Rate	100%	Higher is better	96.92%	98.41%	97.01%	100.00%	100.00%	96.92%	97.47%	95.52%	95.24%	100.00%	98.21%	
<b>Simulation</b>	Number of simulations	2	Higher is better			1		3	2	1	0	1	2	3	1
<b>Screening</b>	Number of repeated newborn screenings	0	Lower is better	9	9	11	4	7	7	8	12	7	18		



# Examples of Lessons Learned

- Call code pinks early: brings anaesthesia backup and extra nurses and an extra RT
- Anaesthesia learner identified experience as helpful and learning NRP algorithms as important
- Emergency umbilical venous lines need to be done promptly: emergency kits placed on resuscitation carts
- Technical issues with neonatal transporter and medical air tank resolved after issues identified
- Most efficient process and timing of moving baby from birthing room to resuscitation room identified
- Able to translate issues from the neonatal quality of care committee to simulations( ie avoid cardiac compressions before establishing effective ventilation)

# Opportunities

- Simulation video and talk at 2014 Day in Perinatology Conference: conveys what we have learned to people in our region
- Combined simulations: Obstetrical and Neonatal resuscitation: aligns well with the MORE OB program

# Challenges

Ensure simulations happen on a regular basis ( at least 2/month) and continue to track the number of simulations : try not to use the excuse “too busy”

Involve **all** stakeholders who may be involved in neonatal resuscitation within the hospital ( pediatrics, obstetrics, anaesthesia, family practice, ED, midwifery, nursing , RTs, porters, paging, etc)

Make sure lessons learned are disseminated to stakeholders and result in actions that improve safety

Video recording and high fidelity simulation are wonderful tools but even if not available should not be a barrier to doing simulations: many lessons can be learned from low tech simulations

# Example of Simulation



•

# Thank you



## **INFORMATION ITEMS**

**St. Joseph's Hamilton Joint Boards of Governors (JBG)**

# Not-for-Profit Governance Boot Camp Summary

## John T. Dinner

Summary of Key Themes by Jessica Fry

### Role of the Board - Definition:

*To enhance staff decision-making to create a viable, sustainable organization*

### Review of Core Board Features

Board Structure

Board Processes

Board Culture

#### ***Key Board Success Factors***

- Shared mission
- Recruit right board members
- Role accountability and clarity
- Board independence
- Board / management relationship
- Board and Committee leadership
- Boardroom behaviors
- Effective orientation and education
- Informed decision making
- Focus on outcomes vs input

#### ***Common Board Challenges***

- Board informational needs / expectations
- Leadership succession
- Orienting new directors
- Director preparation and engagement
- Group dynamics / boardroom culture
- Sharing power / control with management
- Board members not on "same page"
- Input rather than outcome focused
- Clarity of roles and decision making authority
- Measuring performance

# Not-for-Profit Governance Boot Camp Summary

## John T. Dinner

Summary of Key Themes by Jessica Fry

### Role of the Board - Definition:

*To enhance staff decision-making to create a viable, sustainable organization*

#### ***Current Governance State:***

- Focus on governance inputs
- Best practices
- Regulation compliance
- Bylaws

#### ***Ideal Governance State:***

- Substantive proof of governance effectiveness
- Focus on governance outcomes

#### ***Re-Thinking the Role of the Board:***

- Inputs vs .outputs
- Compliance vs. contribution
- Control vs. collaboration
- New focus on Impact

#### ***Key Questions to Challenge your Board:***

- What is your Board's critical contribution?
- What value does your Board deliver to your organization?
- What would your organization lose if the Board ceased to exist?
- What should/could your Board aspire to become?



# Summary notes:

## Not-for-Profit Governance Boot Camp Summary

- The “Not for Profit Governance Boot Camp” workshop was put on by the Canadian Society of Corporate Secretaries and facilitated by consultant John Dinner of “Board Governance Services”.
- The workshop covered the full spectrum of Board Governance theory and provided many examples of high functioning and highly dysfunctional Boards
- One the first slide, you will find some of the key components of a Board that enable Board to fulfill its role, such as the Board’s structure, its processes, and its culture or dynamic.
  1. Structure: membership, leadership roles, committee structure. And whether your membership skills and committee structure reflect the important work required by your organizations
  2. Processes : Include Board member life cycle, meeting effectiveness, recruitment, orientation, education, performance evaluation (how you enable your Board to fulfill its role)
  3. Culture / dynamic: director conduct, relationship between members, relationship with management, level of trust and confidence, clarity of and respect for roles.
- I observed that our Board undertakes a lot of the traditional tenants of ‘good governance’ as outlined above. Further I observed that the OHA Guide to Good Governance is thorough in its recommendations to members on how to ensure Good Board Governance.
- The second slide, shows a few interesting themes that our Board can reflect upon and possibly improve upon, as outlined below.
- The most evident theme that was carried throughout the day was the need for increased focus on Board ‘outputs’ rather than only on inputs or processes.
  - For example, we may we able to check off boxes that we have a generative discussion, we self evaluate, we have an orientation, however, the a new concept is to look at the outputs of our Board in helping us achieve our Mission. We should be asking ourselves “Is the organization seeing the results/outcomes of our Board work?”
- This is useful for reflection as it pushes us beyond the status quo to think about the value that the Board creates for the organization.
- The following questions were proposed as a way to get the Board thinking in terms of outputs:
  - What is your Board’s critical contribution?
  - What value does your Board deliver to your organization?
  - What would your organization lose if the Board ceased to exist?
  - What should/could your Board aspire to become?



**Legend:**

	Internal Orientation
	Foundational Education
	Hot Topic
	Sector-Specific Conference
	International / Other Conference

**2014/15 JBG Education Sessions (Updated November 2014)**

Date	Session Category	Event Name	Location	Recommended Attendees (Position)	Confirmed Attendees
November 2, 2014	Foundational Education	<b>OHA: Advanced Certificate in Board Governance</b>	Metro Toronto Convention Centre	Any member for educational purposes	
November 3-5, 2014	Sector Specific Conference	<b>OHA HealthAchieve</b>	Metro Toronto Convention Centre	SJHH Voting Members	
November 3-5, 2014	Sector Specific Conference	<b>Canadian Home Care Association (CHCA) 2014 Home Care Summit</b>	Fairmont Banff Springs Banff, Alberta	SJHC Voting Members	
November 17, 2014	Foundational Education	<b>OHA: Financial Literacy for Directors of Not-For-Profit Boards</b>	Ontario Hospital Association 200 Front Street West, Toronto	Members of R&A	
November 28, 2014	Hot Topics Sessions	<b>OHA: The Community Engagement Imperative for Health Care Boards</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	Lynn McNeil
December 7-10, 2014	International / Other Conference	<b>IHI: 26th Annual National Forum on Quality Improvement in Health Care</b>	Orlando, Florida	JBG Officers or Committee Chairs	Ray Rocci
February 23, 2015	Hot Topics Sessions	<b>OHA: Building a Culture of Good Governance</b>	Ontario Hospital Association 200 Front Street West, Toronto	Members of GMV	Mary Guise
February 25, 2015	Hot Topics Sessions	<b>OHA: Board Leadership in Risk Governance</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	
March 12, 2015	Hot Topics Sessions	<b>OHA: Leading Effective Board Decision Making</b>	Ontario Hospital Association 200 Front Street West, Toronto	JBG Officers or Committee Chairs	
April 10, 2015	Hot Topics Sessions	<b>OHA: 2<sup>nd</sup> Annual Spring Governance Showcase</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	
April 24, 2015	Foundational Education	<b>OHA: Conference for Board Finance Committee Members</b>	Ontario Hospital Association 200 Front Street West, Toronto	Members of R&A	

Date	Session Category	Event Name	Location	Recommended Attendees (Position)	Confirmed Attendees
April 13-15 2015	Sector Specific Conference	<b>OANHSS: Ontario Association of Non-Profit Homes and Services for Seniors Convention</b>	Sheraton Centre Toronto	SJVD Voting Members	
May 6-8, 2015	Sector Specific Conference	<b>Catholic Health Alliance of Canada Conference</b>	Sheraton Cavalier Hotel Saskatoon, Saskatchewan	JBG Officers or Committee Chairs	
May 22, 2015	Hot Topics Sessions	<b>Strengthening Foundation Governance: Current Issues, Challenges and Solutions</b>	Ontario Hospital Association 200 Front Street West, Toronto	Members of Governance, Mission and Values Committee	
May 25, 2015	Hot Topics Sessions	<b>Strategic Frameworks for Health Care Boards and Senior Management</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	
May 29, 2015	Foundational Education	<b>OHA: Advanced Certificate in Board Governance</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	
June 1, 2014	Hot Topics Sessions	<b>OHA: The Community Engagement Imperative for Health Care Boards</b>	Ontario Hospital Association 200 Front Street West, Toronto	Any member for educational purposes	